

FORM APPROVED
OMB NO. 0579-0036

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use this form.)

[illegible]

ASSURANCE STATEMENTS

- 1). Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2). Each principal investigator has considered alternatives to painful procedures.
- 3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all such exceptions is attached to this annual report.** In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL <i>(Type or Print)</i>	DATE SIGNED
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INSTRUCTIONS FOR COMPLETION OF APHIS FORM 7023A

(Refer to 9 CFR Part 2, Subpart C, Sections 2.33 and 2.36)

ITEM 1 - Enter registration number as assigned to the Research Facility by United States Department of Agriculture (USDA).

ITEM 2 - Enter the complete name and address of the Headquarters Research Facility as registered with USDA.

ITEM 12/13 - Other: List, by common name, all other warm-blooded animal species covered by the Regulations. (This will include farm species used in biomedical or non-agricultural research, and all wild or exotic species.)

DO NOT enter numbers in Column A. **DO NOT** add numbers entered in Column B into the total in Column F. Column F is to show total of numbers entered in Columns C + D + E. Entries in Column E must be explained on attached sheet(s).

CERTIFICATION: Must be signed by the Chief Executive Officer (C.E.O.) of the Registered Research Facility or other Institutional Official (I.O.) having authority to legally commit on behalf of the Registered Research Facility. Sign, Print or type Name and Title, and Date.

RETURN COMPLETED FORM WITH AN ORIGINAL SIGNATURE OF C.E.O. OR I.O. TO APPROPRIATE SECTOR OFFICE.